राष्ट्रीय स्वास्थ्य नीति पर राज्य सरकारों के विचार

2859. **श्री रमा शंकर कौशिक** : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार का राष्ट्रीय नीति पर पुनर्विचार करने हेतु राज्य सरकारों के विचार मागं जा है

(ख) यदि हां, तो कौन-कौन से राज्यों ने अभी तक अपने विचार केन्द्र सरकार को भेज दिये हैं,

(ग) क्या सरकार ने राज्य सरकारों के लिए अपने विचार भेजने हेतु कोई समय-सीमा तय कर रखी हैं, और

(घ) यदि हां, तो तत्संबंधी ब्यौरा क्या हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्री दलित एजिलमलाई) : (क) से (घ) राज्य सरकारों के विचार/सुझाव मांगने के लिए विस्तृत पृष्ठ भूमि वाला एक टिप्पण परिचालित किया गया जिसमें हैदराबाद, शिलांग, श्रीनगर, अहमदाबाद तथा कलकत्ता में जून, से नवम्बर, 1998 तक की अवधि के दौरान आयोजित किए गए क्षेत्रीय राज्य स्वास्थ्य मंत्रियों के सम्मेलनों में स्वास्थ्य क्षेत्र में वर्तमान और नए मामलों पर विचार करने के लिए ध्यान आकृष्ट किया गया था।

मौजूदा समस्याओं और आने वाली चुनौतियों से निपटने की दृष्टि से स्वास्थ्य संबंधी नीति की समीक्षा करने के लिए व्यापक सहमति की जरूरत थी। अन्य बातों के साथ यह सिफारिश की गई कि रोग निगरानी के लिए एक प्रभावी प्रणाली कायम की जानी चाहिए, ग्रामीण स्वास्थ्य के आधार भूत ढांचे के उन्नयन और स्वास्थ्य सेवाओं तक पहुंच को आसान करने के लिए उपाय किए जाने चाहिए । गैर-संचारी रोगों संबंधी उत्पन्न हो रही स्वास्थ्य समस्याओं पर ध्यान देने की जरूरत पर भी जोर दिया गया।

Evening Shin in CGHS Dispensaries

2860. SHRI O.P. KOHLI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are committed to provide more and more health care facilities in the country;

(b) whether a number of CGHS dispensaries are still functioning for a single morning shift; and

(c) if so, by when evening shift would also be provided in such dispensaries for the benefit of beneficiaries of this scheme?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir.

(b) The CGHS dispensaries are functioning from 7.30 a.m. to 1.30 p.m. with full complement of staff. From 1.30 p.m. to 7.30 p.m. and 7.30 p.m. to 7.30 a.m.(next day), emergency services remain available in all the Multi-shift dispensaries. The beneficiaries of Single-shift dispensaries can avail of medical services during this period from attached Multi-shift dispensaires.

(c) There is no such proposal under consideration of the Government at present.

Callous attitude of CGHS Doctors

2861. SHRIMATI MALTI SHARMA: Will the Minsiter of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the callous attitude of doctors in CGHS dispensaries in Delhi, especially in CGHS dispensary, Srinivaspuri, Delhi;

(b) whether doctors do not conduct physical examination of patients and no attempt is made to diagnose the illness suffered by them;

(c) whether Government have received any complaints against doctors working in Srinivas Puri dispensary; and

(d) if so, whether the matter has been examined and action taken in the matter?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) No complaint has been received regarding callous attitude of the doctors in CGHS dispensary, Srinivas Puri.

(b) The patients arc attended by the doctors on individual basis and all required examination/investigations, if necessary, is suggested at the dispensary level. In case any patient needs specialist's consultation/advice, he is referred to the concerned specialist.

(c) No such complaint has been received.

(d) In view of (c) above, the question docs not arise.

Educating People of Aids

2862. SHRI S. AGNIRAJ: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that AIDS patients are gradually increasing in the country,

(b) what is the estimated number of AIDS patients in the country at the end of 1998, state-wise;

(c) what steps arc being taken to .educate people regarding AIDS;

(d) whether any special funds have been allocated for AIDS Control Prog-amme; and

(e) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir.

(b) The total number of AIDS cases reported at the end of 1998 is 6693. State-wise break-up is enclosed as state ment, *(see* below)

(c) In order to prevent and control the spread of HIV/AIDS in India, a com prehensive programme is currently under implementation throughout the country as a centrally sponsored scheme. The main strategy consists of:-

— Strengthening programme management committees at central and state level,

— Creation of awareness amongst high risk behaviour groups and general public about HIV/AIDS.

— Control of Sexually Transmitted Diseases.

— Promoting blood safety and rational use of blood through proper licensing of blood banks and encouraging voluntary blood donation.

— Strengthening capacity for surveillance and diagnosis; and

— Extending training in Clinical Management of HIV/AIDS cases.

(d) and (c) National AIDS Control Programme is a 100% centrally sponsored scheme implemented in the country with a credit of US$84 million from World Bank.

Statement

National AIDS Control Programme India AIDS Cases in India (Reported to NACO) (as on 3!st December, 1998)

S.No.	State/Union Territory	AIDS Cases
1.	Andhra Pradesh	46
2.	Assam	22
3.	Arunachal Pradesh	0
4.	Andaman & Nicobar Island	0
5.	Bihar	3
6.	Chandigarh (U.T.)	
7.	Punjab	100
8.	Delhi	219
9.	Daman & Diu (U.T.)	1
10.	Dadra & Nagar Haveli	0
11.	Goa	12
12.	Gujarat	136
13.	Haryana	1
14.	Himachal Pradesh	9
15.	Jammu & Kashmir	2
16.	Karnataka	157
17.	Kerala	106
18.	Lakshadeep (U.T.)	0
19.	Madhya Pradesh	210
20.	Maharashtra	3315
21.	Orissa	2
22.	Nagaland	10
23.	Manipur	301
24.	Mizoram	5
25.	Meghalaya	8
26.	Pondicherry	141